

BENEFITS PROCEDURES

TABLE OF CONTENTS

<u>Beneficiary Designation Form</u>	65
<i><u>Purpose</u></i>	65
<i><u>Special Instructions</u></i>	65
<u>Reporting an Imminent Death or Terminal Illness/ Power of Attorney</u>	66
<i><u>Power of Attorney</u></i>	66
<u>Death of an Active Member</u>	67
<i><u>Employer Notification to System</u></i>	67
<i><u>Notification By Other Than Employer</u></i>	67
<i><u>Continuation of Health Benefits</u></i>	68
<u>Information for Family of Deceased</u>	69
<u>Retirement — General</u>	71
<i><u>Step-by-Step Instructions</u></i>	71
<i><u>Request for Estimates or Counseling</u></i>	71
<i><u>When to Apply</u></i>	72
<i><u>Additional Notes For Submitting Forms</u></i>	72
<i><u>Who May Apply</u></i>	72
<i><u>Requesting Additional Service Credit</u></i>	72
<i><u>Final Compensation</u></i>	73
<i><u>Cancellation of Retirement Application</u></i>	73
<u>Service Retirement</u>	74
<i><u>Minimum Requirements for Service Retirement</u></i>	74
<i><u>Service Retirement Processing — Document Sequence</u></i>	74
<i><u>Retirement Acknowledgment Letter to Employer</u></i>	75
<i><u>Retirement Acknowledgment Letter to Participant</u></i>	75
<i><u>First Payment Acknowledgement Letter</u></i>	75
<u>Deductions after Retirement</u>	76
<i><u>Health Insurance</u></i>	76
<i><u>Dental Insurance</u></i>	76
<i><u>Vision Care</u></i>	76
<i><u>Direct Authorizations</u></i>	76
<i><u>Income Tax Withholding</u></i>	77
<i><u>Payments for Purchasing Service Credit</u></i>	77
<i><u>Social Security Instructions</u></i>	77
<i><u>Temporary Annuity Payments</u></i>	77
<u>Disability Retirement or Industrial Disability Retirement</u>	78
<i><u>Disability Retirement</u></i>	78
<i><u>Industrial Disability Retirement</u></i>	78
<i><u>When to Apply</u></i>	78
<i><u>Emergency Retirement</u></i>	78
<i><u>Who Can Apply</u></i>	79
<i><u>Application Process</u></i>	79
<i><u>Estimate</u></i>	79
<i><u>Complete Package</u></i>	79
<i><u>Application</u></i>	80
<i><u>Determination</u></i>	80
<i><u>Cancellation of Application</u></i>	80

<u>Employer Originated Application</u>	80
<u>What to Submit with Application</u>	81
<u>Subrogation</u>	81
<u>Member Alternatives Following the Determination</u>	81
<u>Retirement Effective Date</u>	82
<u>General Disability Calculation</u>	83
<u>Employment of a Retiree</u>	85
<u>General Rule</u>	85
<u>Exceptions to General Rule — Limited Duration Employment</u>	85
<u>Eligibility To Work For a CalPERS Employer as a Limited Duration Employee (Retired Annuitant)</u>	86
<u>Unemployment Benefits and Retired Annuitant Employment</u>	86
<u>State Agency and Public Agency Employers</u>	87
<u>California State University</u>	87
<u>Employment By a Non-CalPERS Employer</u>	88
<u>Employment of a Retiree as an “Independent Contractor”</u>	88
<u>Employment of a Disability Retiree*</u>	89
<u>Reinstatement from Retirement</u>	90
<u>Service Retirement</u>	90
<u>Disability Retirement</u>	91
<u>Beneficiary Designation (after Retirement)</u>	93
<u>Notification Of Change In Beneficiary Status</u>	93
<u>Qualifying For Pop-Up Benefits</u>	94
<u>Pop-Up Effective Date</u>	94
<u>Beneficiary Death</u>	94
<u>Dissolution of Marriage, Termination of Domestic Partnership, Legal Separation, Annulment</u>	94
<u>Non-Spouse/Non-Partner Beneficiary Disclaimer</u>	94
<u>Changing Beneficiary Designations & Modifying an Option and/or Life Option Beneficiary</u>	95
<u>Qualifying Events</u>	95
<u>Insurance Coverage for a New Spouse</u>	96
<u>Death of a Retiree</u>	97
<u>Information for Family of Deceased</u>	97
<u>Health Insurance</u>	97
<u>Warrants Issued After Retiree’s Death</u>	98
<u>Completing the Tax Withholding Election for Death Benefits</u>	99
<u>Monthly and/or Prorated Payment Including Any Allowance Adjustments</u>	99
<u>Option One, Temporary Annuity Payments and Retired Death Benefit</u>	99
<u>Tax and Income Reporting Information</u>	100
<u>Statement of Benefits Paid and Withholding</u>	100
<u>Taxpayer Identification Number</u>	100
<u>Notice of Possible Penalties</u>	100
<u>Changing a Tax Withholding Election</u>	100

BENEFICIARY DESIGNATION FORM

The purpose of the [Beneficiary Designation Form](#) (PERS-BSD-241) is to:

1. Provide a means for a member who is not retirement eligible and who is not eligible for the Alternate Death Benefit to designate beneficiaries other than the statutory beneficiaries provided by the retirement law. The statutory beneficiaries are listed under item C on the front of the PERS-BSD-241.
2. Provide a means for a member who is married or in a registered domestic partnership and is eligible to retire (age 50 or over with a minimum of five years of service credit for a 1st-Tier member, or age 55 or over with a minimum of ten years of service credit for 2nd-Tier member) or who is eligible for the Alternate Death Benefit (under age 50 for 1st-Tier member or under age 55 for a 2nd-Tier member, with 20 or more years of service) to designate beneficiaries to receive a one-time payment of the member's community property share. The spouse/registered domestic partner, by law, is still entitled to a choice of a monthly allowance or lump sum benefit. However, the amount is limited to just their community property share if the member designates other beneficiaries on this form.
3. Change the designated beneficiaries.
4. Designate any person or legal entity such as a college, university, corporation, trust, or estate as beneficiary.

Any of the following life events will revoke the [Beneficiary Designation Form](#) (PERS-BSD-241):

1. Marriage/Registration of Domestic Partnership.
2. Dissolution or annulment of marriage or termination of domestic partnership. (However, a designation filed after the initiation of dissolution of marriage, termination of partnership or annulment is NOT revoked when the dissolution, termination or annulment is finalized).
3. Birth or adoption of a child.

4. Termination of employment which results in a refund of contributions or in payment of a monthly retirement allowance.

NOTE:

Following a revoking action, the statutory beneficiaries then become the designated beneficiaries unless a new [Beneficiary Designation Form](#) (PERS-BSD-241) has been filed.

SPECIAL INSTRUCTIONS

1. Changes on the form are acceptable only when they are clear and initialed by the member.
2. Complete the ***Beneficiary Designation Form***; make a copy for your records, then mail to CalPERS.
3. After CalPERS reviews the form, a confirmation letter will be mailed to the member within about 6 weeks. If the form is not acceptable, a new form will be mailed to the member.

NOTE:

The ***Beneficiary Designation Form*** allows a member to designate benefits on a percentage basis if more than one beneficiary is named. The percentages must add up to 100%. If no percentage is indicated, the benefits will be paid equally to each beneficiary.

Also, there is a box the member can check to certify they are not legally married or not in a domestic partnership. If this box is checked, the [Justification for Absence of Spouse's or Domestic Partner's Signature](#) (PERS-BSD-800A) form, is not required.

REPORTING AN IMMINENT DEATH OR TERMINAL ILLNESS/ POWER OF ATTORNEY

When an employer becomes aware of an employee's imminent death, terminal illness, or serious surgery the employer should immediately contact CalPERS by calling **888 CalPERS** (or **888 225-7377**).

Imminent death or terminal illness implies that the member is not expected to live more than 90 days. This also applies to cases where death may not necessarily be imminent, but competency to act in one's own behalf may become impaired thereby jeopardizing later desired retirement action.

If a person is competent to complete the [Special Power of Attorney](#) (PERS-OSS-138) form located in the [CalPERS Special Power of Attorney](#) publication (PUB 30), the person may give his or her "attorney in fact" the power and authority to complete transactions relating to CalPERS, including filing applications, making benefit elections, designating beneficiaries, and endorsing warrants.

NOTE:

Due to changes in the Probate Code, a member may now specifically authorize their attorney-in-fact to select a retirement option and name a beneficiary even if the attorney-in-fact is a spouse, registered domestic partner, or other family member.

To expedite processing, the person reporting an imminent death should provide CalPERS with the following information:

1. Member's name, Social Security number, and birth date.
2. Probable effective retirement date.
3. Current salary information and balance of accumulated sick leave.
4. Name, relationship, birth date, and sex of the person to be designated as the member's beneficiary.
5. Address and telephone number where information can be communicated.

6. Nature and seriousness of illness, estimated life expectancy, and whether the member is presently competent.

CalPERS will then contact the parties concerned regarding the benefit options available, the filing requirements which must be satisfied, and how best to expedite the filing process.

NOTE:

In order for CalPERS to carry out the desired retirement action (e.g., provide an allowance to the beneficiary), it is imperative that the member be alive on the effective date of retirement and an election filed with CalPERS prior to the effective date of retirement. The retirement application/election form can be faxed to CalPERS at (916) 795-1281 with a notation of "Emergency Retirement" in the top margin of the front page. The original should be given to the member for their records.

POWER OF ATTORNEY

For information on the [CalPERS Special Power of Attorney](#) (PUB 30), please visit our Forms & Publication Center on CalPERS On-line at www.calpers.ca.gov.

NOTE:

If the member is married or in a registered domestic partnership and the member's life expectancy is so short that there is no time to call CalPERS, then you should complete a [Disability Retirement Election/Application](#), (my|CalPERS 1200) form in the document center of my|CalPERS.

You cannot elect an option or name a beneficiary, but you must complete the "Survivor Continuance" section 7 to the best of your knowledge. After the completed form is signed, write "EMERGENCY" in the top margin on the first page, and then fax it to (916) 795-1281.

Keep the original for your records. Upon receipt of the fax, a CalPERS representative will call you.

DEATH OF AN ACTIVE MEMBER

EMPLOYER NOTIFICATION TO SYSTEM

Immediately upon learning of an employee's death, the employer should contact CalPERS at **888 CalPERS** (or 888-225-7377) and provide the following information:

1. Member name, Social Security Number, and birth date,
2. Date of death, cause of death, and date of separation,
3. Name, address, and telephone number of next-of-kin,
4. The birth date and date of marriage/partnership if a spouse/registered domestic partner is next-of-kin.

CalPERS will send you a partially completed, [Report of Separation for Death](#) (PERS-BSD-738) form with the following information:

1. Employer name and code
2. Name and Social Security Number
3. Date of death

INSTRUCTIONS FOR COMPLETION OF PERS-BSD-738

The employer should verify and, if necessary, correct any information on the form. The employer completes remainder of form as follows:

PART I – EFFECTIVE DATES

1. Separation Date – Enter last day on pay status, if separation date or date of death differs from the last day on payroll for which contributions were deducted.
2. Reason for Separation – If separation is not due to death, enter reason for separation. Separation date cannot be later than death date.
3. Last Day on Pay Status – Enter last day on payroll.
4. Time base – Enter time base.

PART II – PAYROLL/CONTRIBUTION INFORMATION

1. Dates of pay periods (monthly, semi-monthly, bi-weekly, or quadri-weekly) for the month of separation and each of the three months preceding separation.
2. Amount of full-time pay rate.
3. Gross regular amount earned in each pay period.
4. Amount of regular retirement contributions for each pay period.
5. Amount of special compensation earnings for each pay period.

6. Amount of special compensation contributions for each pay period.
7. Under "Other" column heading, explain other than normal contributions (e.g., retroactive salary increase, etc.).

NOTE:

- Do not combine contributions for Special Compensation with normal contributions. Use the "special compensation" column.
- Do not deduct retirement contributions from the lump sum vacation payments.
- Do not delay submission of this form awaiting final payroll data. Estimate the last period's payroll information and label this line "Estimate".

PART III – UNUSED SICK LEAVE AND/OR UNUSED EDUCATIONAL LEAVE

Please indicate the total number of **days** of unused sick leave and educational leave credited to the member (for members who have attained the minimum retirement age or who are under age 50, but have at least 20 years of state service only) on death date. Show partial days to three decimal places.

PART IV – HEALTH AND DENTAL INSURANCE

Complete only if the member had health insurance coverage under the Public Employees' Medical and Hospital Care Act. A request for change in health benefits coverage based upon change in family status (death) may be made by an enrolled surviving family member who continues to receive an allowance.

PART V – SIGNATURE

Have this form signed by an authorized officer; enter title, phone number and date. Fax completed form PERS-BSD-738 to CalPERS immediately.

NOTIFICATION BY OTHER THAN EMPLOYER

When CalPERS is informed of an employee's death by someone other than the employer, the System will also initiate the PERS-BSD-738 form, partially filled in, and forward to the employer. The employer completes the balance of the form per instructions found in "Employer Notification to System".

CONTINUATION OF HEALTH BENEFITS

AB-1639 (G.C. section 19849.15) Overview
(Does Not Apply to CSU Employees)

Assembly Bill 1639 was passed into law on October 10, 1999, for survivors of State members. This bill was created to prevent the lapse of health coverage between the member's death and the determination of the survivors' health benefits eligibility and monthly allowance. The deceased member's employer must pay the total amount of the premiums for 120 days for eligible survivors; however, the employer may elect to bill survivors for the survivors' share of the premiums.

Procedures

1. Employer reports the member's death to CalPERS.
2. Employer completes a [Direct Payment Authorization](#) (HBD-21) form using the survivors' Social Security number and demographic information.
3. Employer requests the total health premium amount for 120 days of health coverage from the agency's Fiscal Office.
4. Employer sends the completed HBD-21 and 120-day premium check directly to the health plan carrier.
5. Employer bills the spouse or other eligible family member(s) for the employee's share of the cost.
6. Employer completes the same steps for dental and vision benefits.

HBD-21 Instructions for AB 1639

Employers must complete and submit the following sections of the HBD-21 to the survivor's health plan for enrollment.

Part A

Employee Information

1. Survivor's Social Security number
2. Survivor's full name

3. Survivor's home phone number
4. Survivor's home address

Part B

Carrier and Premium

- 5a. Survivor's health plan's name and address
- 5b. Health plan 4 digit code (e.g., Kaiser 0562)
- 6a. Gross premium for 120 days of health coverage (4 months)
- 6b. Do not complete
- 6c. Do not complete
- 6d. No signature required
- 6e. No date required

Part C

Reason for Direct Pay

Always use box 14 (other) and write in the explanation box *AB 1639 survivor coverage for 120 days*.

Leave all other boxes blank.

Part D

Agency Information

- 15a. Name, address and contact number of the deceased member's employer
- 15b. Do not complete
16. Start and end dates of the survivor coverage under AB 1639 (4 month period beginning the first of the month following the member's death and ending the last day of the 4 month coverage)
17. Do not complete
18. Health Benefit Officer's signature
19. Date the HBD-21 was completed
20. Employer's telephone number

INFORMATION FOR FAMILY OF DECEASED

When CalPERS is notified of an active employee's death, a letter (which may not provide an estimate of the benefits payable) and the publication ***Pre-Retirement Survivor Benefits*** (PUB-55) will be sent to the next of kin. The booklet explains the benefits which may be payable and provides an Application for ***Active Member/Non-Member Survivor Benefits*** (PERS-BSD-1167).

If an estimate is not provided, or if only lump sum benefits are payable, the PERS-BSD-1167 may serve as the claim form if completed by the designated or statutory beneficiary. If there is a choice of monthly or lump sum benefit an election must be made on the PERS-BSD-1167. If the information provided in the initial PERS-BSD-1167, along with any designation on file, indicates the proper beneficiary remains to be contacted, a claim form will be sent to the proper beneficiary. Payment of death benefits will be as soon as possible after receipt of the claim form and any other documents required (e.g., marriage, birth, or death certificates).

To determine the beneficiary(ies), CalPERS will check the system for a valid ***Beneficiary Designation Form*** (PERS-BSD-241) (See Beneficiary Designation Form section for more information). If a valid PERS-BSD-241 has been filed and if the member was eligible for retirement, or if the Alternate Death Benefit is payable, the allowance payable to the surviving spouse will be reduced and the beneficiary(ies) designated will receive a one-time payment of the employee's community property share. If the PERS-BSD-241 is no longer valid or has not been filed, death benefits will normally be paid to the statutory beneficiary as follows:

- I. If the member was eligible for retirement or if the Alternate Death Benefit is payable on the date of death:
 - a) Member's surviving spouse or registered domestic partner if married/registered for at least one year prior to the onset of the illness or injury that caused the member's death,
 - b) Unmarried minor child

- II. If the member was not eligible for a monthly allowance:
 - a) Member's registered domestic partner or surviving spouse (whether or not still living together at the time of death); or, if none,
 - b) Natural and adopted children, including (in limited circumstances) a natural child adopted by another, share and share alike; or, if none,
 - c) Parents, share and share alike; or, if none,
 - d) Brothers and sisters, share and share alike; or, if none,
 - e) Member's estate (if probated, or subject to probate); or, if not,
 - f) Member's trust, if one exists; or, if not,
 - g) Stepchildren, share and share alike; or, if none,
 - h) Grandchildren, including step-grandchildren, share and share alike; or, if none,
 - i) Nieces and nephews, share and share alike; or, if none,
 - j) Great-grandchildren, share and share alike; or, if none,
 - k) Cousins, share and share alike.

*Any of the following events will, by law, revoke the ***Beneficiary Designation Form*** (PERS-BSD-241):

- a) Marriage or registration of domestic partnership.
- b) Dissolution or annulment of marriage or termination of partnership if initiated after the designation was filed.
- c) Birth or adoption of a child.
- d) Termination of employment which results in a refund of contributions or in payment of a monthly retirement allowance.

Following the member's death, a spouse or registered domestic partner may request a [Disclaimer of Benefits](#) (myCalPERS 0362) form if he/she does not wish to receive their community property interest in the death benefits. If the [Disclaimer of Benefits](#) (myCalPERS 0362) form is completed, then the entire Basic Death Benefit may be paid to the person(s) designated on the PERS-BSD-241, unless the member is survived by a minor child who would become the statutory beneficiary entitled to a monthly allowance.

NOTE:

Original documents (death certificate, marriage certificate, etc.) should NOT be sent to CalPERS. Only clear photocopies of these documents should be submitted. To expedite the death benefit payment process, ensure that the deceased member's Social Security Number appears in the top right corner of each photocopy so that the documents are associated with the correct file.

RETIREMENT — GENERAL

STEP-BY-STEP INSTRUCTIONS

For step-by-step instructions on completing the forms used to process a Service Retirement, please refer to [A Guide to Completing Your CalPERS Service Retirement Election Application](#) (PUB 43) or visit the Forms & Publications Directory on the CalPERS Website.

REQUEST FOR ESTIMATES OR COUNSELING

Members may wish to receive an estimate of their CalPERS retirement allowance. There are several important things members should know about CalPERS retirement estimates:

1. Members may receive immediate estimates by using the CalPERS On-Line Retirement Estimate Calculators, available on the CalPERS Website, www.calpers.ca.gov. Using the online Retirement Estimate Calculator allows members the flexibility to calculate an estimate using assumptions or projections anticipated by or known to the member, allowing them to determine the best retirement date based on these anticipated changes or projections. This is also the recommended service for members seeking retirement estimates greater than one year in the future. Since our CalPERS-generated estimates do not project future salary increases, changes in time base, or unreported special compensation, members may not find them useful.
2. CalPERS generated retirement estimates are processed by the Benefit Services Division. These estimates use the payroll reported by the employer. However, actual final compensation may be different after payroll reconciliation and review, and will be based on compensation allowable by law. Members who are within one year of their expected retirement date may request a CalPERS generated Retirement Estimate if they download, complete, and mail the [Retirement Allowance Estimate Request](#) form to CalPERS located on the CalPERS Website. Members within one year of retirement may request two CalPERS generated estimate requests in a 12-month period. Alternatively, a request form can be mailed to you by calling CalPERS at **888 CalPERS** (or **888-225-7377**).

3. All information on the Retirement Allowance Estimate Request form must be completed before an estimate can be processed. **Important:** Please be sure the address and CalPERS ID and/or Social Security number are legible.
4. Retirement benefit estimates will be mailed to the address indicated on the request form within 30 days of receipt of the request by CalPERS.
5. A request for an estimate is NOT an application for retirement. A [Service Retirement Election Application](#) (myCalPERS 1206) or [Disability Retirement Election Application](#) (myCalPERS 1200) must be submitted to apply for retirement. An application for retirement may not be used to request an estimate. If the member plans to retire in the near future, the employer should provide the member with the CalPERS brochure [Planning Your Service Retirement](#) (PUB 1) and the [CalPERS State Miscellaneous and Industrial Benefits Booklet](#) (PUB 6) or the [CalPERS State Safety Booklet](#) (PUB 7). These publications provide additional benefits to consider in preparing for retirement.
6. Members are encouraged to take a CalPERS retirement planning class prior to submitting their application for retirement. CalPERS offers a series of five classes designed to educate and inform CalPERS members at any stage of their careers. Members are encouraged to take these classes throughout their careers to ensure they understand their benefits and to prepare for retirement. These classes are available both online and in a classroom with an instructor. Visit the [CalPERS Education Center](#) on our website www.calpers.ca.gov to view the latest schedules and enroll in a class, or call our toll free number **888 CalPERS** (or **888-225-7377**) for more information.

WHEN TO APPLY

An application for retirement should be forwarded to the Benefit Services Division not more than 90 days prior to the desired effective date.

NOTE:

A disability retirement application should be submitted as soon as a medical condition becomes disabling and prior to the expiration of benefits to ensure the member is eligible for the earliest effective date possible.

This advance notice permits CalPERS to make calculations and begin payments on a timely basis. Members should be advised of this and encouraged to mail their applications to:

CalPERS
Benefit Services Division
P.O. Box 942711
Sacramento, CA 94229-2711

ADDITIONAL NOTES FOR SUBMITTING FORMS

If the application is submitted by FAX to the Benefits Services Division, DO NOT send the original hard copy application.

DO NOT submit any original Certificates (Marriage, Birth, Death, etc.). Send only photocopies of important documents, as CalPERS cannot return original documents. Each page should have the member's Social Security Number for identification.

If the application was received within nine months after discontinuance of employment, or, in the case of retirement for disability, if the member was physically or mentally incapacitated to perform his or her duties within nine months from the date the member discontinued state service, the effective date of retirement will be the day following the last day of payroll.

In the case of an application for retirement filed with the Board more than nine months after discontinuance of the member's state service, the effective date shall be the first of the month in which the member's application was received at an office of the Board or by an employee of this system designated by the Board.

WHO MAY APPLY

SERVICE RETIREMENT

A 1st-Tier state member who has reached age 50 and has earned at least five years of credited service or a 2nd-Tier member who has reached age 55 and has earned at least ten years of credited service may submit an application for retirement. The application must be submitted by the member and show a definite retirement date. It is the employee's responsibility, not the employer's, to see that the retirement application is sent to CalPERS.

NOTE:

If the member is employed in an overtime position or multiple positions with CalPERS employers, the member MUST separate from all employment to retire, even though they may not be receiving service credit for one or more of the positions.

DISABILITY OR INDUSTRIAL DISABILITY RETIREMENT

Please refer to the instructions found under "Disability Retirement or Industrial Disability Retirement" in this section of the handbook.

NOTE:

A member who is employed on a permanent part-time basis and has worked at least five calendar years for 1st-Tier or ten years for 2nd-Tier may be eligible to retire with less than five or ten years of credited service. The retirement benefit the member will receive will be based on their actual service credit amount. (G.C. section 20970)

REQUESTING ADDITIONAL SERVICE CREDIT

All requests for service credit cost information must be received prior to the member's effective retirement date. The retirement date can be no earlier than the day following receipt of the request by CalPERS. Therefore, it is important that the member request any additional service credit information well in advance of their retirement to avoid possible delays in the retirement date.

[A Guide to Your CalPERS Service Credit Purchase Options](#) (PUB 12) can be downloaded from the CalPERS Website at www.calpers.ca.gov or requested by employers from the CalPERS Central Supply Section by submitting an email request to: Public_Agency_Requests@calpers.ca.gov.

Service credit and questions should be directed to:

CalPERS
Customer Account Services Division
P.O. Box 942704
Sacramento, CA 94229-2704

For more information contact CalPERS at **888 CalPERS** (or 888-225-7377) or visit the CalPERS Website at www.calpers.ca.gov.

FINAL COMPENSATION

Effective 07/01/91 all state employees were given a one year final compensation in the calculation of their retirement benefit. This means that 12 consecutive months of salary will be averaged to calculate their retirement benefit.

Recently, new legislation and labor contracts provide retirement contribution increases for employees in certain bargaining units, and changes to the retirement benefits and final compensation period for new employees who have no prior State employment.

It is now essential to pay particular attention to the date the employee was first hired by the State and their bargaining unit or affiliation to ensure contributions paid into this System are correct. Failure to properly report your employees impacts the timeliness and accuracy of benefits paid and could result in a financial hardship for your employees when errors are ultimately discovered and corrected as required by law.

Any questions about bargaining unit agreements should be directed to the California Department of Human Resources (CalHR). Additional information can be found on their website www.calhr.ca.gov under Personnel Policies, 2010 PML's and on the State Controller's Office's Website www.sco.ca.gov under Pay Letters 2010.

For more information, refer to California Public Employees' Retirement Law (PERL), G.C. sections 20037–20037.15.

CANCELLATION OF RETIREMENT APPLICATION

If a member desires to cancel the service retirement application or defer retirement to a later date, the member must request to do so within 30 days of the issuance of the first retirement check. For cancellation of disability retirement, refer to the instructions found under the "Disability or Industrial Disability" section. A cancellation is binding; the member must thereafter re-apply whenever the member is ready to retire.

Within 30 days after the first monthly payment been issued, the member will not be allowed to cancel the retirement.

A member may request a refund of accumulated contributions in writing in lieu of retirement within 30 days of the issuance of the first monthly payment.

SERVICE RETIREMENT

MINIMUM REQUIREMENTS FOR SERVICE RETIREMENT

A member shall be retired for service upon written application if the member has reached the minimum retirement age and has earned at least five years of credited service under 1st-Tier or ten years under 2nd-Tier. Minimum retirement age is 50 for 1st-Tier retirement plan and 55 for 2nd-Tier retirement plan. A member with credited service under both 1st-Tier and 2nd-Tier should contact CalPERS for exceptions to the 2nd-Tier minimum age and service requirement.

SERVICE RETIREMENT PROCESSING — DOCUMENT SEQUENCE

1. [Service Retirement Election Application](#) (my|CalPERS 1206) is received in the System from the member. Please note that if the member is married but is not able to obtain the spouse's signature on the [Service Retirement Election Application](#) form, they must complete a [Justification for Absence of Spouse's Signature](#) (PERS-BSD-800A).

The application package includes information regarding required marriage and birth date evidence. **Do not submit any original certificates.** Send only photocopies of important documents; CalPERS cannot return original documents. Each page of all documents submitted to CalPERS should include the member's Social Security Number in the upper right hand corner for identification.

The [Direct Deposit Authorization](#) (my|CalPERS 1288) form can also be submitted with the election application form.

2. **Employer Certification** Employers must certify the separation information by submitting it and any updates online using my|CalPERS. Separation information includes the employee's permanent separation date and any unused sick leave or educational leave balances. If the information is submitted prior to CalPERS processing the member application the additional service credit will be included in the member's initial retirement benefit. Otherwise

the member's account will be adjusted after the information is submitted.

It is imperative that you report a permanent separation when an employee retires or otherwise ends employment with your agency, regardless of the reason. All transactions within my|CalPERS, including health and retirement, rely on the permanent separation date to be reported to determine proper benefit eligibility and cost for both the employer and the member.

To receive sick leave credit or educational leave credit, the member's retirement date must be within 120 days from the date of separation from the employer granting the sick leave or educational leave. Educational leave shall **ONLY** apply to eligible State members in bargaining units that have agreed to the benefit in a memorandum of understanding through collective bargaining.

NOTE:

Sick leave/educational leave information must be reported in **8 hour days** only. Employers can take whatever in-house procedures they desire to ensure appropriate sick leave/educational leave days are reported. For instance, the employee's sick leave/educational leave can be taken off the books the day the certification is completed.

The Personnel Information Management System (PIMS) is still used to report credit for unused sick leave/educational leave. If your agency needs to correct the reported amounts, you should correct the permanent separation event on the appointment in my|CalPERS which will allow you to update the sick leave/educational leave amounts to the correct number and the member's account will be adjusted.

CONVERSION OF SICK LEAVE/EDUCATIONAL LEAVE CREDITS FOR EMPLOYEES WORKING EIGHT HOURS PER DAY

All employees, regardless of their work schedule (6.6 hours, 10/4/40, 9/8/80, 52 hour, etc) will have any accumulated unused hours of sick leave service credit/educational leave divided by **eight** to determine the number of days to report

to CalPERS for the purposes of enhancing the retirement benefit.

Sick leave is converted to service credit by: days of reported sick leave X .004 = service credit.

Example: 35 days X .004 equals .140 years of service credit.

NOTE:

The accrual of sick leave/educational leave credits must be consistent for members of the same group or class who work like or similar hours. Service credit, which was not earned through the “accrual of sick leave/educational leave” policy, may not be credited on an individual basis for the purposes of enhancing the retirement benefit. Unused sick leave/educational leave for which a member receives compensation, (sick leave/educational leave cash out) should not be reported to CalPERS for purposes of enhancing the retirement benefit.

3. A [Retirement Acknowledgment Letter to Participant](#) (my|CalPERS 0964) is sent to the member and the [Employer Acknowledgment Letter](#) (PERS-BSD-197) within 5-10 days of receipt of the [Service Retirement Election Application](#) (my|CalPERS 1206) in our Sacramento Headquarters office letting them know we have begun processing the request. If the member does not receive an acknowledgment letter within 10 days they should contact CalPERS immediately.

4. [First Payment Acknowledgement Letter](#) (my|CalPERS 0924) will be sent to the member prior to receipt of the first retirement check. This letter will provide the date of the first retirement check, the amount the member can expect to receive, and important income tax information. If the member has CalPERS health coverage, the health insurance letter will have information about those benefits. The member should keep these letters along with other CalPERS documents and review the information immediately to ensure it is correct.

NOTE:

The member must notify CalPERS prior to the issuance of their first full benefit payment if any changes need to be made in their benefit option election, beneficiary, or retirement date.

5. **Account Detail Information Sheet** is attached to the my|CalPERS 0924, which explains the data used to calculate the member’s retirement allowance.

6. [First Acknowledgment Letter for Employers](#) (my|CalPERS 0926) is sent to the employer after the employee is placed on the retirement roll. The my|CalPERS 0926 provides the employer with the number of sick leave days that were included in the employee’s retirement calculation.

NOTE:

The my|CalPERS 0926 is mailed to the employer prior to the issuance of the member’s first retirement check, but usually after the member’s separation date.

For future employment of the retiree, please refer to the section on “Employment of a Retiree” and the section on “Reinstatement from Retirement”.

DEDUCTIONS AFTER RETIREMENT

HEALTH INSURANCE

Health eligibility continues for a retiree of the CalPERS Health Program under the following conditions:

- The retiree was eligible for CalPERS health enrollment upon permanent separation of employment;
- The retiree receives a monthly retirement allowance from CalPERS; and
- The effective date of retirement is within no more than one full pay period following the effective date of permanent separation of employment.

If the retiree meets all of the above conditions but the effective date of retirement is greater than one full pay period up to 120 calendar days following the effective date of permanent separation, the retiree must submit a request to CalPERS for enrollment. The effective date of coverage will be the first of the month following the date the request is received by CalPERS.

NOTE:

If the retirement effective date is greater than 120 calendar days following the effective date of permanent separation, the retiree will not be eligible to elect enrollment in the CalPERS Health Program.

For questions on health insurance benefits, please refer to the CalPERS Website at www.calpers.ca.gov, or call CalPERS at **888 CalPERS** (or 888-225-7377).

DENTAL INSURANCE

A member must be enrolled in or eligible for a state dental plan on their date of separation from employment and retire within 120 days of separation. For questions on eligibility, please refer to the CalHR Procedures Manual.

CalPERS sends a [First Acknowledgement Letter for Employers](#) (myCalPERS 0926) to notify you when a member is placed on the retirement roll.

A [Dental Plan Enrollment Authorization](#) (STD-692) must be completed and sent to CalPERS in order to enroll a member in retired coverage.

It is **not** necessary to have the member's signature on the form; it can be signed as an "Administrative Doc." The STD-692 needs to be completed using the retired plan codes, not active. Please list in the "Remarks Section," the member's separation date and retirement effective date.

VISION CARE

The State-sponsored vision plan is available to state annuitants. A member must be eligible for the vision care plan on the date of separation from employment and must retire within 120 days of separation. For additional information contact your personnel office or the California Department of Human Resources at (916) 322-0300.

NOTE:

Most deductions will stop at retirement and will need to be re-established (with the exception of health, dental, and some union memberships).

DIRECT AUTHORIZATIONS

Direct authorization deductions for union dues, life insurance, credit union payments or shares, or charitable organizations may be established provided that:

1. The organization has contracted with CalPERS to provide this service (members must contact the organization for this information);
2. The member authorizes to have money deducted through the organization;
3. The organization submits the authorization directly to CalPERS; and
4. Authorized deductions are stopped or changed upon receipt of written authorization from the organization.

CalPERS' function is limited to the mechanics of deducting and determining what deduction authorization is proper. Inquiries concerning these types of "other deductions," should be directed to the organization.

INCOME TAX WITHHOLDING

Federal and California State income tax deductions will be withheld from monthly or lump sum benefit payments unless the retiree specifically elects no tax withholding. Federal (W4P), and California State (DE4P) tax withholding forms must be completed to elect either a specific dollar amount of withholding, a withholding based on tax tables, or specifically elect no tax withholding. If the election form is not filed with CalPERS, automatic withholding begins based on a married person with three (3) exemptions. Any questions retirees have concerning the taxability of their allowance should be directed to the Internal Revenue Service or California State Franchise Tax Board.

PAYMENTS FOR PURCHASING SERVICE CREDIT

A member who previously elected to purchase public service credit, redeposit contributions for service credit, or has arrears contributions, may elect upon retirement to continue any payments due into retirement. In such cases, service credit will be included in the retirement calculation and a monthly payment will be taken from the member's retirement allowance. Any balance still unpaid upon the member's death shall be deducted from death benefits otherwise payable. A retired member's survivor entitled to a monthly survivor allowance may elect to continue such deductions from the monthly allowance in lieu of the lump sum payment otherwise required. The following criteria must be adhered to:

1. No installment payments (deductions) are permitted unless an election has been made prior to retirement.
2. Death benefits against which unpaid balances may be deducted include the lump sum benefit, survivor continuance benefits, and payments under all optional settlements.

SOCIAL SECURITY INSTRUCTIONS

Members having Social Security coverage, integrated with System coverage, should contact their local federal Social Security Office about three months before their retirement. Reference material needed by the Social Security Office will be: Social Security number, name of the employer, and documentary proof of birth.

TEMPORARY ANNUITY PAYMENTS

Members who are retiring for service can elect to receive an additional monthly allowance from CalPERS.

For members entering CalPERS membership prior to January 1, 2002, the benefit is payable from retirement date to a specific age that the member selects, 59 ½ or any whole age from 60 to 68. The member can name the dollar amount they wish to receive within certain limitations.

For members entering CalPERS membership on or after January 1, 2002, their employment must be in a position covered by Social Security and the maximum dollar amount that can be received is the amount of their potential Social Security benefit. They must elect to receive temporary annuity payments until any whole age from 62 to 70.

This benefit is NOT free. The member's CalPERS lifetime allowance is permanently reduced to pay for the temporary annuity.

The [Temporary Annuity](#) publication (PUB 13) can be downloaded and member questions on the program can be directed to the CalPERS Website at [**www.calpers.ca.gov**](http://www.calpers.ca.gov), or by calling CalPERS at **888 CalPERS** (or 888-225-7377).

DISABILITY RETIREMENT OR INDUSTRIAL DISABILITY RETIREMENT

You should maintain a supply of [A Guide To Completing Your CalPERS Disability Retirement Election Application](#) (PUB 35), which includes the disability retirement application, forms to be completed with step-by-step instructions and important information regarding disability and industrial disability retirement. Please familiarize yourself with the information in the publication to provide assistance to your employees. CalPERS strongly recommends that members complete and mail the [Retirement Allowance Estimate Request](#) form prior to completing the [Disability Retirement Election Application](#) (myCalPERS 1200).

DISABILITY RETIREMENT

Retirement for disability, available to all members (Miscellaneous, Industrial, Safety classifications) credited with at least five years of service credit for 1st-Tier and at least 10 years of service credit if 2nd-Tier, is retirement resulting from mental or physical incapacity for the performance of the usual duties. The injury or disease causing the incapacity need not be job-related.

NOTE:

A member who is employed on a permanent part-time basis and has worked at least five years for 1st-Tier or ten years for 2nd-Tier may be eligible to retire with less than five or ten years of credited service. The retirement benefit the member will receive will be based on their actual service credit amount. (G.C. section 20970)

INDUSTRIAL DISABILITY RETIREMENT

Retirement for *industrial disability*, available to all safety members and those miscellaneous members covered under G.C. section 21151, is retirement resulting from mental or physical incapacity for the performance of the member's usual duties. The disabling injury or disease must be work incurred or job-related. *State Industrial* members must show they were violently attacked by an inmate or parolee of the Department of Corrections, the Youth Authority, or a forensic facility of the Department of Mental Health that resulted in their disability. Age, service, and contributions are not considered for qualifying purposes.

WHEN TO APPLY

The application for disability retirement shall be made only:

1. While a member is in state service, or
2. For a member, whose contributions will be made under G.C. section 20997, and is absent on military service, or
3. Within four months after the discontinuance of the state service of the member, or while on an approved leave of absence, or
4. While the member is physically or mentally incapacitated to perform their duties from the date of discontinuance of state service to the time of application or motion.

As soon as it is believed the member is unable to perform the job because of an illness or injury, which is expected to be permanent, or last longer than six months, the member or someone on the member's behalf, should submit an application for disability retirement. The medical condition does not have to be "permanent and stationary" under Workers' Compensation to submit the application.

EMERGENCY RETIREMENT

CalPERS can expedite retirement processing for members who are facing a terminal illness. If this is the case, CalPERS should be contacted immediately to discuss an emergency retirement. We will make every effort possible to quickly obtain the necessary information and complete our processing. However, for any post-retirement death benefits to be paid, the member must be living on the effective date of retirement. Please refer to the beginning of this chapter for more information.

WHO CAN APPLY

Application for disability or industrial disability retirement may be made by the member, by a duly authorized official of the employing agency, or any person on behalf of the member.

“Duly authorized official” referred to above, is defined in G.C. section 21152 (a)(b)(c).

G.C. section 21153 provides that the employer may not separate a member because of disability who is otherwise eligible to retire for disability. The employer must apply for the disability retirement of such a member unless the member waives the right to retire for disability and elects to either withdraw their contributions or leave them on deposit for a future service retirement.

APPLICATION PROCESS

The member or individual applying on the member's behalf, other than the employer, is responsible for forwarding all forms to the appropriate party(ies) for completion. (See the “Employer Originated Application” section later in this chapter of this handbook for further information).

Estimate — The member's first step should be to request a Retirement Estimate online at the CalPERS Website, or download, complete and submit the [Retirement Allowance Estimate Request](#) (my|CalPERS 1211) form also available online. Alternatively, a request can be made by calling CalPERS at **888 CalPERS** (or **888-225-7377**).

Complete Package — In order for CalPERS to process a request for disability retirement, a complete package must be received within 30 calendar days. If a complete package is not received within this time frame, CalPERS will cancel the member's application. A complete package consists of:

- A completed [Disability Retirement Election Application](#) (my|CalPERS 1200).
- A completed [Authorization to Disclose Protected Health Information](#) (my|CalPERS 1203) signed by the member.
- A completed [Physician's Report on Disability](#) (my|CalPERS 1204) from a physician who specializes in the member's disabling condition. The physician must provide a diagnosis on the member's

condition and include information about how it prevents the member from performing their job duties (an incomplete form will delay the review process).

- An [Employer Information for Disability Retirement](#) (my|CalPERS 1201) form with the job description attached. This form must be used as a cover sheet for the job description and any other documents the employer submits to CalPERS.

NOTE:

Submission of the job description should not be delayed for the completion of the [Report of Separation & Advance Payroll Information](#) (my|CalPERS 1205) form. Employers should return the (my|CalPERS 1205) form as soon as information is available.

- A completed [Physical Requirements of Position/Occupation Title](#) (my|CalPERS 0700) form providing detailed information on the specific physical requirements of the member's position or occupational title.
- A completed [Request Information for Compensation Review](#) (my|CalPERS 0793) form from the insurance carrier, if the member has a job-related injury, with medical records attached related to the claimed disability.

All the required forms needed are included in [A Guide to Completing Your CalPERS Disability Retirement Election Application](#) (PUB 35). The member should read the entire publication prior to completing any forms so the information submitted is complete and accurate. This will assist CalPERS in making a determination in a timely manner.

NOTE:

It is the member's responsibility to follow up with the employer, workers' compensation carrier, and treating physician(s) to ensure the requested information is submitted to CalPERS. If the required information is not received within 30 calendar days of application submission, the application will be cancelled.

Application — When the member submits the [Disability Retirement Election Application](#) (myCalPERS 1200), the following sections must be completed:

Sections 1 - 8 and 10 & 11 - Completed by the member or by someone on the member's behalf.

Section 2 - Member does not need to designate a retirement date to begin the process unless requesting service pending disability or industrial disability retirement.

Section 5 - Member must select an option, and to make an informed decision, they must first request an estimate.

Section 11 - Member's signature must be witnessed by a CalPERS representative or be notarized.

Determination — The disability decision is based upon competent medical opinion; and all medical and vocational information provided by the member, employer, and workers' compensation carrier is considered in the determination. The determination is based on actual/present disability, not prospective inability to perform the job duties. In the event the medical information supplied to CalPERS is insufficient to make a determination, CalPERS may arrange an Independent Medical Examination (IME).

NOTE:
Generally, the disability retirement determination can be made within three to six months after CalPERS receives all required information for a complete package. However, if additional information is needed, this will extend the review process.

If the member is found to be disabled due to a mental disorder, competency will be decided based on medical opinion. Conservatorship or a valid Power of Attorney may be required before benefits are payable. For Power of Attorney instructions, please refer to the booklet [Power of Attorney](#) (PUB 30).

NOTE:

If the member is currently enrolled in the CalPERS health plan and becomes employed in another job pending the determination of disability retirement benefits, eligibility for CalPERS health benefits may be affected after retirement.

Cancellation of Application — If a member desires to cancel the disability retirement application, other than an employer originated application, the request must be made in writing to be valid. The member's signature is required. A cancellation is binding; the member must thereafter re-apply whenever they are ready to retire. If the disability retirement has been approved, please refer to the "Member Alternatives Following Disability Determination" section for more information.

EMPLOYER ORIGINATED APPLICATION

When an employer is submitting the [Disability Retirement Election Application](#) (myCalPERS 1200) on the member's behalf, the following sections must be completed:

Section 1 - Member Information

Section 2 - Retirement Information - Complete only the employer name and member's position title. The retirement date is not required.

Section 3 - Workers' Compensation Information

Section 4 - Disability Information

Section 9 - Employer Certification

Section 12 - Employer Originated Application - Signature must be made by the Duly Authorized Official on file with CalPERS or processing will be delayed.

The employer should not complete Section 5 (Option Election), Section 6 (Retired Death Benefit), Section 7 (Survivor Continuance), Section 10 (Tax Withholding Election), or Section 11 (Member Signature and Notary). A **Supplemental Retirement Information** form will be sent to the member for additional information once the disability retirement is approved by CalPERS.

What to Submit with Application —

The following documentation should be submitted with the application the employer files on behalf of the member:

- Job Duty Statement (preferably Job Analysis)
- Physical Requirements of Position/Occupational Title form
- Personnel Records
- Adverse Actions
- SPB Decisions
- Investigation Reports
- Medical information to support application (e.g., Fitness for Duty reports, Doctor Notes, etc.)

NOTE:

Only an employer can cancel an **Employer Originated Application**.

TEMPORARY DISABILITY ALLOWANCE (TDA) —

An employer is required to pay the employee a Temporary Disability Allowance (TDA), provided all of the following conditions have been met:

- The employee has exhausted their leave credits; and
- The employee is placed on involuntary leave status; and
- The employer is applying for disability or industrial disability retirement on the employee's behalf.

To determine the amount of the TDA, submit a [Disability Estimate Request](#) (myCalPERS 1211) form. The request should be completed in full and mailed or faxed to:

CalPERS
Customer Account Services Division
PO Box 942715
Sacramento, CA 94229-2715
Fax: (916) 795-0371

The request form must include the last day on pay status. The recommended retirement date to use on the application is the first of the month the application will be sent to CalPERS.

If the disability retirement is approved, CalPERS will reimburse the employer the amount of TDA that was paid to the member from the retroactive

portion of the retirement allowance. If the amount of TDA exceeds the retroactive amount, the employer will be reimbursed from the member's monthly retirement allowance at the rate of 10% until the reimbursement is satisfied. If the disability retirement is denied, the employer is responsible for paying the member the difference between the TDA and the employee's salary. The member also receives leave credits for the time they were on TDA.

For additional information regarding TDA, please refer to CalHR's Personnel Management Liaison (PML) memo 2002-005.

Subrogation

Under the law, if someone other than the employer caused an injury that results in disability retirement benefits being paid to the member, CalPERS has the right to recover up to one-half of the total retirement benefit costs from the responsible party. This is known as the "right of subrogation."

If the member pursues a claim against any person for the same injuries that also entitles the member to a disability retirement from CalPERS (other than a Workers' Compensation claim or an uninsured motorist claim), the member must inform CalPERS. This is true even if the claim has not yet resulted in a court action. CalPERS has the right to participate in the claim through filing its own action against the responsible party, intervening in the claim or filing a lien against any judgment recovered. If such a claim is settled without notifying CalPERS, we may also be entitled to file a lawsuit against the member for recovery under our subrogation rights.

Member Alternatives Following the Determination

When the member has been found to be "disabled," the member will be notified of the finding and advised that they must be retired immediately. The member cannot cancel the application for disability retirement after disability has been determined. However:

1. If the member is also eligible and applies to retire for service (prior to the effective date of retirement for disability or within 30 days of notification of disability approval), the member may be retired for service.

2. The member may also elect to separate from employment and accept a refund of accumulated contributions in lieu of all future rights and benefits under this System.
3. The member may appeal the approval determination directly to CalPERS.

When the member has been found to be “not disabled” and the application is denied, the member will be notified of the finding and provided the opportunity to appeal the decision.

NOTE:

All appeals must be submitted in writing directly to CalPERS within 30 days from the date of the notification letter.

CalPERS is subject to the Administrative Procedures Act (APA). Therefore, in case of an appeal to the determination, the dispute must be heard by an administrative law judge of the State Office of Administrative Hearings.

The APA is set forth in the Government Code and the statutes describe the requirements and methods for conducting an administrative hearing.

Retirement Effective Date

If the application was received within nine months after discontinuance of employment, or, in the case of retirement for disability, if the member was physically or mentally incapacitated to perform their duties within nine months from the date the member discontinued state service, the effective date of retirement will be the day following the last day of payroll.

In the case of an application for retirement filed with the Board of Administration more than nine months after discontinuance of the member's state service, the effective date shall be the first of the month in which the application was received.

If a member has been approved for disability retirement, the law states the member must be retired immediately. The member may remain on pay status to use sick leave and/or compensating time off for overtime to which the member is entitled. The determination of what sick leave and/or compensating time off that a person is entitled to is a matter that must be resolved by each employer.

General Disability Calculation

You can get an idea of what the member's monthly unmodified disability retirement allowance will be. To do so, you need to know three things:

- How many years of service credit the member has;
- The benefit formula (1.8% for State 1st-Tier or 1.125% for State 2nd-Tier); and
- The final compensation — based on the highest consecutive 12 or 36 months of pay rate, **not earnings**, (usually the last 12 or 36 months of employment). See the Final Compensation topic in this section for information about whether to use 12-month or 36-month compensation.

Find the benefit factor and years of service credit in the following groupings. Then follow the instructions using the worksheet at the bottom of the next column.

STATE 1ST-TIER

A State 1st-Tier member must have **at least five years** of service credit to be eligible for disability retirement.

If the member has between **five and 10 years, OR 18½ or more years** of service credit, multiply the years of service by **1.8%** to determine the percentage of final compensation.

If the member has between **10 and 18½ years** of service credit, **add** to that figure the number of years until the member will be age 60 and multiply the **TOTAL** by **1.8%** to determine the percentage of final compensation. (The maximum percentage allowable is 33 ⅓ %.)

THEN

Multiply the percentage of final compensation by the highest consecutive **12-month or 36-month** average monthly salary to find the Unmodified Allowance. (If the member is eligible for service retirement, the member will receive the higher allowance payable, service or disability).

STATE 2ND-TIER

A State 2nd-Tier member must have at least ten years of service credit to be eligible for disability retirement.

If the member has between 10 and 29.629½ years of service credit, add to that figure the number of years until the member will be age 65 and multiply the **TOTAL** by 1.125% to determine the percentage of final compensation. (The maximum percentage allowable is 33 ⅓ %)

If the member has 29.629 years or more of service credit, multiply the years of service by 1.125% to determine the percentage of final compensation.

THEN

Multiply the percentage of final compensation by the highest consecutive 12-month or 36-month average monthly salary to find the Unmodified Allowance. (If the member is eligible for service retirement, the member will receive the higher allowance payable, service or disability).

Figuring the Disability Allowance Worksheet

Years of Service	Benefit Factor	% of Final Compensation
_____	X _____ %	= _____ %
% of Final Compensation	Final Compensation	Unmodified Retirement Allowance
_____ %	X \$ _____	= \$ _____

INSTRUCTIONS FOR COMPLETION OF THE MY | CALPERS 1205

Upon approval of an application for disability retirement by the System, the Benefit Services Division will require payroll information to begin the disability retirement payments.

The [Report of Separation and Advance Payroll Information](#) (my|CalPERS 1205) must be completed by the employer.

The first section is to be completed by the member:

Section 1 – Employing Agency and Member Information:

- Name of Employing Agency
- Member's name
- Social Security Number
- Retirement date requested by the applicant

The following three sections are to be completed by the employer:

Section 2 – Effective Separation or Termination Dates

- Separation Date
- Termination Date
- Last Day of on Pay Status
- Beginning and ending dates of leave of absence with compensation
- Explanation of the difference between the date of separation and last day on pay status, if any.

NOTE:

If a member retires on the day following the last day on the payroll, then the date of separation and the last day on the payroll will be the same date. If a member goes on leave of absence or is absent without leave, etc., at the time of retirement, then the date of separation and the last day on the payroll may not be the same.

Section 3 – Unused Sick Leave at Time of Separation

If the member has a sick leave balance that was not used at the time of separation from employment, report the total number of 8 hour days, not hours, of unused sick leave.

Section 4 – Certification of Employer

- Signature of Payroll Officer
- Title
- Date
- Phone number

Immediately mail the my|CalPERS 1205 form to the address provided on the form. Failure to submit the form on a timely basis may result in a delayed warrant to the recipient.

NOTE:

1. Do not combine contributions for maintenance and Special Compensation with normal contributions. Use the "other" column.
2. Do not deduct retirement contributions from lump sum vacation payments.
3. Do not delay submission of this form awaiting final payroll data. Estimate the last period's payroll information and label this line "Estimate."

EMPLOYMENT OF A RETIREE

To avoid unlawful employment, it is imperative employers ensure compliance with the retirement laws defined below. These laws may apply to both service and disability retirees. Failure to comply can result in administrative penalties to the retiree and employer and mandatory reinstatement from retirement.

CIVIL SERVICE ELIGIBILITY

In addition to the retirement law restrictions, all retired annuitant appointments by state agencies must be based on Civil Service Act eligibility: A retired state civil service employee may be appointed as a retired annuitant to a position that is either (a) in the class in which the person had permanent or probationary status or a Career Executive Assignment (CEA) appointment at the time of retirement; or (b) in another class to which the person could have been permanently transferred, reinstated, or demoted at the time of retirement. A CalPERS retiree who is not retired from civil service, i.e. retired from non-state contracting agencies and retired state employees exempt from civil service, can only be appointed as a retired annuitant if he/she qualifies for appointment under other civil service provisions such as emergency appointment, temporary authorization (TAU) appointment or eligibility on a civil service employment list for the position.

For more information, see Personnel Management Policy and Procedures manual pages 360.1 – 360.4 available from the California Department of Human Resources.

GENERAL RULE

G.C. section 21220 provides that a person retired on a service or disability retirement, receiving a monthly allowance from CalPERS, may not be employed, **unless otherwise noted**, in any capacity by a CalPERS employer (an employer who contracts with CalPERS for retirement benefits unless the employment qualifies for service credit in the University of California Retirement Plan, the California State Teachers' Retirement System or any of the 1937 Act County Retirement Systems) without first applying for reinstatement from retirement.

Any person employed in violation of this section is subject to reinstatement to CalPERS membership as of the date the unlawful employment began.

Upon mandatory reinstatement the person will be required to:

1. Reimburse CalPERS for any retirement allowance received during the period of unlawful employment.
2. Pay CalPERS employee contributions that should have been paid during the period of unlawful employment, plus interest.
3. May be required to pay reimbursement of CalPERS' administrative expenses incurred in handling the situation.

The employer who employs a retired person in violation of the law will be required to:

1. Pay CalPERS employer contributions, which should have been paid during the period of unlawful employment, plus interest.
2. May be required to pay reimbursement of CalPERS' administrative expenses incurred in handling the situation.

EXCEPTIONS TO GENERAL RULE —

LIMITED DURATION EMPLOYMENT

Under the following provisions, reinstatement from retirement is not required (except as noted), and no employee or employer contributions should be made to CalPERS. The employer and the retiree have equal responsibility to ensure the retiree's employment is in compliance with the retirement law and regulations.

ELIGIBILITY TO WORK FOR A CALPERS EMPLOYER AS A LIMITED DURATION EMPLOYEE (RETIRED ANNUITANT)

BONA FIDE SEPARATION REQUIREMENT

Employment with a CalPERS employer is not allowed if the retiree is under “normal retirement age” unless both of the following conditions are met (G.C. section 21220.5):

1. There was no agreement to return to work as a retired annuitant between the employee and the employer before the member retired, and
2. There is a “bona fide” break in service of at least 60 days between the member’s retirement date and the date the retiree’s employment will begin.

Normal retirement age is the age named in the member’s retirement benefit formula. For example, the normal retirement age for a 2% @ 55 benefit formula is 55 and is age 65 for the 1.25% @ 65 formula. If the member has more than one benefit formula, then the normal retirement age is determined by the highest normal retirement age benefit formula. If the retiree is at or above normal retirement age as noted above, the section 21220.5 restrictions do not apply and he/she can be appointed the day after their retirement date.

G.C. section 21220.5 was added to the retirement law in 2004 to comply with IRS tax regulations prohibiting in-service distributions of pension benefits. The only exception to the Section 21220.5 qualification restrictions is for employment during emergencies as defined in G.C. section 8558.

Please refer to Circular Letter No. 200-181-04, Employment After Retirement with a CalPERS Covered Employer Dated September 3, 2004, which contains detailed information about the law, applicable regulations and frequently asked questions. Circular Letters can be referenced on the CalPERS Website at www.calpers.ca.gov.

UNEMPLOYMENT BENEFITS AND RETIRED ANNUITANT EMPLOYMENT

Effective January 1, 2005, G.C. section 21224 was amended to prohibit a retired member from returning to retired annuitant employment with a

public agency or state agency if during the prior 12 month period the retired member received unemployment insurance compensation based on their prior retired annuitant employment with the same employer. Effective January 1, 2007, the amendment was added to the G.C. sections 21227 and 21229.

The intent of these amendments is to prevent retired CalPERS members from collecting three public stipends: a retirement allowance, salary for work up to 960 hours per fiscal year, and unemployment insurance compensation after the 960 hour limit had been reached.

In 2005, State Agencies in conjunction with the California Department of Human Resources (CalHR) and the Employment Development Department (EDD) developed the following two forms for retired annuitants working for state agencies only to complete.

RETIRED ANNUITANT SELF CERTIFICATION FORM

CalHR Form 715, a Retired Annuitant Self-Certification form, can be downloaded from the California Department of Human Resources Website at www.calhr.ca.gov.

AUTHORIZATION FOR RELEASE OF UNEMPLOYMENT INSURANCE RECORDS FOR RETIRED ANNUITANTS

EDD Form DE 1181 can be downloaded from the Employment Development Department Website at www.edd.ca.gov.

California State Universities (CSU) are not required to use these forms when employing retired members; however, they may require retired members to provide a current Unemployment Insurance Benefit (UIB) print out indicating if they have collected unemployment insurance benefits within the previous 12 months.

CalPERS’ auditors have incorporated this requirement into the random auditing criteria for employers. A violation of this provision will not result in automatic reinstatement from retirement for the retired person.

Questions regarding employment of a retired member can be resolved by calling the CalPERS Customer Contact Center at **888 CalPERS** (or 888-225-7377).

EMPLOYMENT BY A CALPERS EMPLOYER

NOTE:

No employee or employer contributions are made to CalPERS for retired annuitant employment. Refer to the PIMS manual or CSUC manual for information on how to properly code a retired annuitant appointment.

1. State Agency

An otherwise eligible retired state employee may be employed in a limited duration appointment to a position not to exceed 960 hours in any fiscal year for all CalPERS employers; either (1) during an emergency to prevent stoppage of public business or (2) because the retired employee has skills needed in performing work of limited duration.

The compensation for the appointment shall not exceed the maximum monthly base salary paid to other employees performing comparable duties as listed on a publicly available pay schedule divided by 173.333 to equal an hourly rate. Retired annuitants shall not receive any benefit, incentive, compensation in lieu of benefits, or other forms of compensation in addition to the hourly rate (G.C. section 21224).

NOTE:

This information applies ONLY to limited duration employment situations. If the retired member is found to be employed in a permanent full-time or part-time position regardless of the number of hours worked, the retired member will be subject to mandatory reinstatement from retirement into CalPERS membership retroactive to the date the unlawful employment began.

2. Juror or Election Officer

Any retired person may serve as a juror or election officer and receive fees for such service. (G.C. section 21221(c); not subject to 960 hour rule).

3. School Crossing Guards

Any retired person may be employed as a school crossing guard. (G.C. section 21221(b); not subject to 960 hour rule).

4. Service for Litigation

A retired former employee may be employed to prepare for potential or actual litigation or to testify in trial proceedings or at a hearing and be paid per diem and necessary travel expenses not to exceed the rate paid other persons for similar services. The per diem paid must be reduced by the daily equivalent of the retiree's retirement annuity. Contact the CalPERS Customer Contact Center at **888 CalPERS** (or 888-225-7377) to obtain the amount of the retiree's monthly annuity benefit. For a retired State employee, this employment must be approved by CalHR (G.C. section 21223; not subject to 960 hour limit).

5. California State University (CSU)

CSU Academic Retirees

A retired person may be temporarily employed, in any fiscal year, as a member of the academic staff in a CalPERS covered position of CSU not to exceed 960 hours for all employers or 50 percent of the hours the member was employed during the last fiscal year of service prior to retirement, **whichever is less** (G.C. section 21227).

CSU Non-academic Retirees

A retired person may be employed upon temporary appointment by a school employer or by the Trustees of CSU (1) during an emergency to prevent stoppage of public business or (2) because the retired employee has skills needed in performing specialized work of limited duration if that service does not exceed a total of 960 hours for all such employers in any fiscal year. The compensation for the appointment shall not exceed the maximum monthly base salary paid to other employees performing comparable duties as listed on a publicly available pay schedule divided by 173.333 to equal an hourly rate. Retired annuitants shall not receive any benefit, incentive, compensation in lieu of benefits, or other forms of compensation in addition to the hourly rate (G.C. section 21229).

6. Appointive Positions

a) The Governor, Speaker of the Assembly, the President pro Tempore of the Senate, director of a state department, or the governing board of a contracting agency, may appoint any retired member to serve as a member of any salaried or non-salaried board, commission or advisory committee (G.C. section 21221(a)).

- b) The Legislature, either a house or a legislative committee may appoint any retired person to a position deemed by the appointing power to be temporary in nature (G.C. section 21221 (f)).

7. Elective Positions

Any retired person may serve as an elective officer without reinstatement from retirement; however, any part of the retirement allowance based on previous service in that same elected office shall be suspended during incumbency in the elected office. When the retiree vacates the elected office, the suspended allowance shall be resumed prospectively (G.C. sections 21221(d) and 21222).

EMPLOYMENT BY A NON-CALPERS EMPLOYER

A retired person receiving a CalPERS service retirement allowance may be employed (1) by any employer who does not participate in the CalPERS system and (2) may be self-employed without reinstatement from retirement or reduction to the service retirement allowance.

A retired member receiving an ordinary disability (not industrial disability) retirement allowance may be employed by any employer not participating in the CalPERS system, or may be self-employed with the following two restrictions:

1. The employment (position) must be significantly different from the position from which he/she retired, and;
2. If the retired member is under age 50 and retired with all 1st-Tier service, or under age 55 with any 2nd-Tier service, the retired member's allowance is subject to an earnings limit until age 50 or 55 is reached. The retiree is responsible for notifying CalPERS when beginning such employment and for reporting earnings to CalPERS timely. Please refer to publication, [Employment After Retirement](#) (PUB 33) for details.

EMPLOYMENT OF A RETIREE AS AN "INDEPENDENT CONTRACTOR"

Many "contracts" or "employment agreements" entered into by retirees and employers and purported to give the retiree the status of an "independent contractor" are, upon review by CalPERS, found not to qualify the retiree as an independent contractor under California contract law.

If CalPERS determines the contract is not within the guidelines for an "independent contractor" after the retiree has entered into employment, the employment is unlawful and the retiree is subject to mandatory reinstatement from retirement. Such reinstatement is retroactive to the start date of the unlawful employment and the retiree is liable for reimbursement of all retirement allowance payments received during the period of unlawful employment. In addition, administrative penalties may be assessed to the employer.

Therefore, to ensure compliance with retirement law, the contract or employment agreement should be reviewed by CalPERS prior to the retiree accepting the employment.

To request approval for employment of a retiree as an independent contractor, please submit your request, including the retiree's name and social security number with a copy of the proposed contract or employment agreement and scope of duties to:

CalPERS
Benefit Services Division
PO Box 942711
Sacramento, CA 94229-2711

Direct specific questions about employment of a retiree as an independent contractor or consultant to the CalPERS Customer Contact Center at **888 CalPERS** (or 888-225-7377) or by letter to the address above.

EMPLOYMENT THROUGH A THIRD PARTY

EMPLOYER (ALL RETIREES)

Before employing a retiree through a third party employer or temporary employment agency, please contact CalPERS. If the retiree will be an employee of the CalPERS employer under common-law principles, the retiree's employment could be subject to CalPERS restrictions, even if a third party employer pays the retiree's wage.

Direct specific questions about employment of a retiree through a third party employer or temporary employment agency to the CalPERS Customer Contact Center at **888 CalPERS** (or **888-225-7377**).

NOTE:

For limited duration employment not to exceed 960 hours, see the Limited Duration Employment section under Exceptions to General Rule.

For specific questions concerning employment of a CalPERS' retiree please review the publication [Employment After Retirement](#) (PUB 33) available on the CalPERS Website at www.calpers.ca.gov, or contact CalPERS at **888 CalPERS** (or **888-225-7377**).

EMPLOYMENT OF A DISABILITY/INDUSTRIAL

DISABILITY RETIREE

The Board may approve CalPERS reemployment without reinstatement for a member who is receiving a disability/industrial disability retirement allowance and who is offered a specific job in a position that is significantly different from which the member retired. Such employment cannot begin prior to the Board's approval (G.C. section 21228).

To request reemployment approval:

1. The retiree needs to complete and sign Section 1 of the [Request to Work While Receiving Disability/Industrial Disability Retirement Benefits](#) form (my|CalPERS 1199) provided in the [Employment After Retirement](#) publication (PUB 33).

2. The prospective employer completes Section 2 of the request form, stating their "intent to hire" the retiree upon CalPERS approval. Attach a copy of the current job duty statement and a

completed and signed [Physical Requirements of Position/Occupational Title](#) form (my|CalPERS 0700) for the position which the retiree is requesting to work.

3. Provide a medical report from the retiree's treating physician, who specializes in the member's disabling condition, stating that he/she has recently examined the retiree, reviewed the job duty statement, along with a completed and signed [Physical Requirements of Position/Occupational Title](#) form (my|CalPERS 0700) and finds the retiree is able to perform all tasks without restriction or limitation. CalPERS may require an independent medical evaluation to supplement the doctor's report. If so, CalPERS will select the physician, schedule the appointment, and pay for the examination.

Upon approval of the reemployment, the retiree will be required to report monthly earnings to CalPERS, as the disability/industrial disability retirement pension is subject to an earnings limit for as long as the employment continues.

NOTE:

No employee or employer contributions are made to CalPERS for these types of employment.

For specific questions concerning employment of a CalPERS retiree, please review the publication [Employment After Retirement](#) (PUB 33) available on the CalPERS Website at www.calpers.ca.gov or contact CalPERS at **888 CalPERS** (or **888-225-7377**).

REINSTATEMENT FROM RETIREMENT

If you wish to hire a retiree in a permanent position, whether full-time or part-time, the retiree must reinstate from service retirement into active CalPERS membership. A member on service retirement does not need approval prior to beginning active employment. However, to avoid an overpayment of retirement benefits and prevent payroll reporting problems for the employer, it is important to submit the ***Reinstatement From Service Retirement Application*** (my|CalPERS 0668) in a timely manner.

NOTE:

A retired person on a disability or industrial disability must be approved for reinstatement prior to being hired as a regular employee.

The publication ***Reinstatement From Retirement*** (PUB 37) includes the reinstatement applications for retired members on service, disability, or industrial disability retirement as well as information about the voluntary reinstatement process in general. There is also information about mandatory reinstatement and the other consequences of unlawful or “illegal” employment. The publication is available in the Forms & Publications Center on the CalPERS Website at www.calpers.ca.gov or by calling **888 CalPERS** (or 888-225-7377).

Please be aware that reinstatement to an employer other than the one from which the member previously retired can result in the loss of the previous retirement benefits. The retiree should contact the new employer’s personnel office to clarify any questions about health and dental benefits, vision care, unused sick leave and death benefits available to that employer’s employees and retirees before reinstating. A previous Golden Handshake is permanently lost upon reinstatement with any employer.

Reinstatement from retirement affects the cost-of-living adjustment (COLA). The annual COLA increase will begin in the second calendar year after re-retirement.

To retire again following reinstatement (re-retire), the member must submit a new

application for retirement. The member should contact the employer’s personnel office or CalPERS prior to retirement to obtain the most current application document(s).

SERVICE RETIREMENT

The Board, pursuant to the provisions of G.C. section 21196, may reinstate a person who has been retired under this System for service upon CalPERS receipt of the completed ***Reinstatement From Service Retirement Application*** (my|CalPERS 0668). This application is enclosed in the ***Reinstatement From Retirement*** publication (PUB 37).

The member is responsible for completing Sections 1 and 3. Section 2 must be completed by a Human Resource or Personnel representative of the employer certifying the start date of the permanent employment.

A person who has been retired under this System for service, following an involuntary termination of the person’s employment, and who is subsequently reinstated to such employment by action on or after October 1, 1965, pursuant to an administrative or judicial proceeding, shall be returned to employment status for the period specified by the judgment. The requirements of Section 21196 shall not apply in this case (G.C. section 21198).

A person who has been retired under this System for service may be reinstated from retirement pursuant to this article without regard to the requirements of G.C. section 21196, upon the retiree’s application to CalPERS, if upon reinstatement, the retiree will be appointed by the Governor to any state office or employment (G.C. section 21199).

When a person is reinstated from retirement, the retirement allowance is cancelled and the retiree becomes a member of the System as of the date of reinstatement. The retiree’s individual account shall be credited with the actuarial equivalent of the retiree’s annuity at the date of reinstatement, not to exceed the amount of accumulated contributions at the date of retirement (G.C. section 21200).

DISABILITY/INDUSTRIAL DISABILITY RETIREMENT

1. The Board may require any member receiving a disability/industrial disability retirement allowance, under the minimum age for voluntary retirement for service, to undergo a medical examination. If CalPERS determines that such recipient is not incapacitated for duty, the agency shall be notified that such person is eligible for reinstatement to duty. The fact that the member was retired for disability/industrial disability does not prejudice any right to reinstatement to duty, which the member may claim. The member's disability/industrial disability retirement allowance will be canceled on the effective date of the employer's job offer (G.C. sections 21192 and 21193).
2. Any retiree may request approval from CalPERS to reinstate, whereby the retirement allowance is canceled and the member resumes active member status, including earning additional service credit towards their subsequent retirement.

To request approval, the member must:

- Complete Section 1 of the [Request for Reinstatement from Disability/Industrial Disability Retirement](#) form (my|CalPERS 0669) found in the document center of my|CalPERS;
- Provide a current job duty statement for the position and a completed and signed [Physical Requirements of Position/Occupational Title](#) form (my|CalPERS 0700);
- Provide a current written report from their treating physician, specializing in the member's disabling condition that indicates the job duty statement and the [Physical Requirements of Position/Occupational Title](#) form (my|CalPERS 0700) was reviewed and the member was recently examined and is found able to fully perform the tasks of the job duties without limitation or restrictions.

If the member is requesting reinstatement into a different position from which they retired, the prospective employer must complete Section 3 stating their intent to hire the member upon CalPERS approval (G.C. sections 21192 and 21193).

3. A member retired for industrial disability may request approval from CalPERS to reinstate to a position which is classified as Miscellaneous.

To request approval, the member must:

- Complete Sections 1 and 2 of the [Request for Reinstatement from Disability/Industrial Disability Retirement](#) form (my|CalPERS 0669) found in the document center of my|CalPERS;
- Provide a current job duty statement and a completed and signed [Physical Requirements of Position/Occupational Title](#) (my|CalPERS 0700) form for the position; and
- Provide a current written report from their treating physician, specializing in the member's disabling condition that indicates the job duty statement and the [Physical Requirements of Position/Occupational Title](#) (my|CalPERS 0700) form were reviewed, that the member was recently examined and is found able to fully perform the tasks of the job duties without limitation or restrictions.

The prospective employer must:

- Complete Section 3 stating their intent to hire the member upon CalPERS approval (G.C. sections 21192 and 21193);

Upon subsequent retirement, the member's allowance will be recalculated based on the highest final compensation period during employment using the same retirement benefit formula for industrial disability and adding an annuity for the additional time worked after reinstatement. If the member is eligible for a service retirement after the miscellaneous employment, the member may receive whichever allowance is greater, but will retain the industrial disability retirement classification (G.C. sections 21197 and 21200).

4. If the member whose disability retirement has been canceled does not re-enter CalPERS covered employment, an amount which is the actuarial equivalent of the member's annuity at cancellation shall be credited to the individual account, and shall be refunded unless the member is eligible to elect, and does elect, to allow their accumulated contributions to remain in the retirement fund (G.C. section 21172).

BENEFICIARY DESIGNATION (AFTER RETIREMENT)

NOTIFICATION OF CHANGE IN BENEFICIARY STATUS

It is important for a retired member to contact CalPERS to request a [Changing Your Beneficiary or Monthly Benefit After Retirement](#) publication (PUB 98) when any one of the following qualifying events occur because his or her designated beneficiary's entitlement to certain CalPERS benefits could be affected.

- Marriage or Registration of Domestic Partnership of the retiree.
- Legal separation, dissolution or annulment of the retiree's marriage, or termination of the retiree's domestic partnership, if initiated after the designation was filed.
- Birth or adoption of a child.

Should any one of these events occur, a retiree's existing beneficiary designation for the balance of Option 1 contributions, the lump sum death benefit, or the balance of Temporary Annuity payments are automatically revoked. Once the designation is revoked, lump sum benefits will be paid to the statutory beneficiaries in the following sequence:

1. To the retiree's spouse/registered domestic partner, or if none;
2. To the retiree's natural or adopted children, share and share alike, or if none;
3. To the retiree's parents, share and share alike, or if none;
4. To the retiree's brothers and sisters, share and share alike, or if none;
5. To the retiree's estate, if probated. If the estate does not require probate, but there is a trust, benefits will be paid to the trust. If there is no trust, benefits will be paid to the surviving next of kin in the order prescribed by law.

A retiree may designate a new beneficiary by obtaining a [Changing Your Beneficiary or Monthly Benefit After Retirement](#) publication (PUB 98), which includes a **Post Retirement Lump Sum Beneficiary Designation Form** (PERS-BSD-509-P) and returning the completed form to CalPERS.

The publication is available in the Forms & Publications Center on the CalPERS Website at www.calpers.ca.gov.

If the retiree wants his or her statutory beneficiary(ies) to receive the lump sum benefits payable, there is no need to file a PERS-BSD-509P. However, filing PERS-BSD-509P may help us locate the person(s) upon the retiree's death.

The retiree's spouse or domestic partner is required to sign the PERS-BSD-509P acknowledging the designation made by the retiree. If the retiree does not certify they have no spouse/partner or the document does not include the spouse's or partner's signature, a [Justification for Absence of Spouse's Signature](#) (PERS-BSD-800) must be completed and submitted with their designation.

NOTE:

A retiree's designation and benefit entitlement to any lump sum death benefit may be affected by any domestic relations court order, which awards a current or ex-spouse or partner a community property interest in the retiree's CalPERS retirement account.

For an explanation of the limited situations under which a retiree may change their optional settlement and/or life beneficiary designation after retirement, please refer to the [Changing Your Retirement Option or Life Option Beneficiary](#) publication (PUB 98). The publication is available on the CalPERS Website at www.calpers.ca.gov.

A survivor or beneficiary who is receiving an allowance following the death of the retiree may designate a beneficiary to receive any unpaid allowance by completing and filing a [Designation for Beneficiary's or Survivor's Prorated Allowance](#) (PERS-BSD-509B) form with CalPERS.

NOTE:

If a retiree marries or enters into a registered domestic partnership, the new spouse/domestic partner is not automatically entitled to a monthly death benefit. The retiree would have to modify the Option and name a new beneficiary. A modification will cause a reduction in the retiree's allowance to provide an ongoing allowance with health and dental coverage to the new spouse or domestic partner. For more information, refer to the [Changing Your Beneficiary or Monthly Benefit After Retirement](#) (PUB 98) available on the CalPERS Website at www.calpers.ca.gov.

QUALIFYING FOR 'POP-UP' BENEFITS

If the retiree elected the Option 2 or 3 benefit on or after January 1, 1990, the retiree's allowance will increase to a higher allowance, if one of the following events occurs:

- The retiree's beneficiary dies.
- The retiree's Option 2 or Option 3 beneficiary is the retiree's spouse or registered domestic partner and they divorce, legally separate, or the marriage is annulled and they provide CalPERS with a copy of their judgment that awards the member the entire community property interest in their CalPERS benefits.

The retiree's non-spouse/non-domestic partner beneficiary waives entitlement to the Option 2 or Option 3 benefit by filing a [Non-Spouse/Non-Domestic Partner Disclaimer of CalPERS Benefits](#) (my|CalPERS 0362) form, which will be provided by CalPERS upon request, which must be signed, notarized and approved by CalPERS.

If the retiree's retirement date is before January 1, 1990 and one of the three events listed above occurred less than 10 years following the retirement date, the retired member's allowance may be increased to the actuarial equivalent of the Unmodified Allowance.

If the retiree's retirement date is before January 1, 1990 and one of the three events occurred more than 10 years following their retirement date, they are not entitled to an allowance increase. There is no 'pop-up' increase if the retiree elected Option 2W or 3W (W = waived pop-up). If the retiree feels they are entitled to an increase, they should request the [Changing Your Beneficiary or Monthly Benefit After Retirement](#) (PUB 98), which contains a **Request for Option 2 or 3 'Pop-Up' Increase** form (PERS-0M0015-DMC).

'POP-UP' EFFECTIVE DATE

Beneficiary Death

The retiree's allowance will increase to a higher allowance effective on the first of the month following the beneficiary's month of death.

Dissolution of Marriage, Termination of Domestic Partnership, Legal Separation, or Annulment

The retiree's allowance will be increased to a higher allowance effective the first of the month following CalPERS receipt of the judgment awarding them total interest in their CalPERS benefit.

Non-Spouse/Non-Domestic Partner Beneficiary Disclaimer

The retiree's beneficiary will be asked to sign a [Non-Spouse/Non-Domestic Partner Disclaimer of CalPERS Benefits](#) (my|CalPERS 0362) form, which will be provided by CalPERS upon request, which must be signed, notarized and approved by CalPERS.

The retiree's allowance will increase effective the first of the month following CalPERS' receipt of the properly completed and notarized [Non-Spouse/Non-Domestic Partner Disclaimer of CalPERS Benefits](#) (my|CalPERS 0362) form.

CHANGING BENEFICIARY DESIGNATIONS AND MODIFYING AN OPTION AND/OR LIFE OPTION BENEFICIARY

A retiree who elected the Unmodified Allowance or Option 1 may change the beneficiary for the lump sum retired death benefit, the balance of Option 1 or balance of Temporary Annuity at any time.

A retiree can also modify their current retirement election and name a new beneficiary for a lifetime option allowance after a qualifying event (as described below), provided their current lifetime option beneficiary is not a former or legally separated spouse/domestic partner who has a community property interest in their CalPERS retirement benefit.

NOTE:

Electing a modification of option reduces the retiree's current allowance. The amount of the retiree's allowance reduction depends upon the retiree's age and the age of their new beneficiary at the time of the election. Modifying a retiree's option is also referred to as a "recalculation of option."

QUALIFYING EVENTS

The following events allow the retiree to modify their allowance or retirement option and name a new beneficiary.

1. Death of Retirement Option Beneficiary

If the retired member elected:

- a) Unmodified Allowance or Option 1
 - The death of their beneficiary is not a qualifying event.
- b) Option 2, 2W, 3, 3W, or 4
 - The retired member can modify their election of the option 2, 2W, 3, 3W, or 4 to another option and name a new beneficiary.

2. Retired Member's Marriage or Entry into a Registered Domestic Partnership

If the retired member elected:

- a) Unmodified Allowance
 - The retired member can modify their election of the Unmodified Allowance to an Option 1, 2, 2W, 3, 3W, or 4 and name their current spouse/domestic partner as beneficiary.

b) Option 1

- The retired member can modify their Option 1 to an Option 2, 2W, 3, 3W, or 4 and name their current spouse/domestic partner as beneficiary.

c) Option 2, 2W, 3, 3W, or 4

- If retired member has a former spouse/domestic partner and they are not the Option 2, 2W, 3, 3W, or 4 beneficiary, they can modify their election to an Option 1, 2, 2W, 3, 3W, or 4 and name their current spouse/domestic partner as beneficiary.

NOTE:

If the retired member's former spouse or former domestic partner is the retired member's beneficiary, see the **Dissolution of Marriage, Legal Separation, or Annulment** section for information on their ability to modify their allowance or retirement option.

3. Dissolution of Marriage, Termination of Domestic Partnership, Legal Separation, or Annulment

If the retired member elected:

a) Unmodified Allowance and Option 1

- This is not a qualifying event.

b) Option 2, 2W, 3, 3W, or 4

- If the retired member's former or legally separated spouse/domestic partner is the Option 2, 2W, 3, 3W, or 4 beneficiary and the dissolution/termination or legal separation judgment on retired community property awards the member the entire interest in the CalPERS retirement, their beneficiary can be changed and they can modify the election to an Option 1, 2, 2W, 3, 3W, or 4 and name a new beneficiary.

NOTE:

If the retiree's former or legally separated spouse or domestic partner is their Option 2, 2W, 3, 3W, or 4 beneficiary and the dissolution/termination or legal separation judgment dividing the community property does not award the retiree the entire interest in their CalPERS retirement, the retiree's former or legally separated spouse or domestic partner cannot be removed as beneficiary.

4. Non-Spouse/Non-Domestic Partner Beneficiary Disclaims Lifetime Allowance

If the retired member elected:

- a) Unmodified Allowance or Option 1, 2, 2W, 3, 3W, or 4
 - Regardless of what option the retired member chooses, a non-spouse/non-domestic partner beneficiary disclaimer is not a qualifying event for a modification of option. This simply means the non-spouse/non-domestic partner beneficiary relinquished their entitlement to CalPERS benefits.

If a retiree wishes to change their option and/or name a new beneficiary for a lifetime option allowance, the retiree should access the document center in my|CalPERS to complete an **Application to Modify Option and/or Life Option Beneficiary** (my|CalPERS 1197) form which is within the [Changing Your Beneficiary or Monthly Benefit After Retirement](#) publication (PUB 98).

Effective Date for Changing an Option

If the retiree made an election to change their option within 12 months of the qualifying event, the effective date is the first of the month following CalPERS receipt of the completed election document. Both the retiree and their new beneficiary must be alive on the effective date.

If the retiree makes an election to modify their option more than 12 months after the qualifying event, the modification will not become effective until 12 months after the election is made. Both the retiree and their new beneficiary must be alive on the deferred election effective date.

Insurance Coverage for a New Spouse/Registered Domestic Partner

When a retiree considers a modification of retirement option, they need to remember that continuation of health or dental insurance coverage of a new spouse/domestic partner depends on their being enrolled as a dependent on the retiree's plan at the time of the retiree's death and whether the retiree made an election of option that provides the new spouse/domestic partner with a monthly benefit.

If a retiree has CalPERS health insurance, they must immediately notify CalPERS if they divorce, terminate a domestic partnership, or suffer the death of a spouse, domestic partner, or other dependent. Failure to make a timely notification may result in incorrect premium deductions from the retiree's monthly allowance.

DEATH OF A RETIREE

If you become aware of the death of a retiree, please contact CalPERS with the name, birth date, Social Security Number, and date of death of the deceased, as well as the names, relationships, and addresses of the next of kin. A written or telephone communication detailing this information is acceptable for death notification provided an official of the agency gives it. **The form [PERS-BSD-738](#) SHOULD NOT be submitted for a retiree's death.**

INFORMATION FOR FAMILY OF DECEASED

When a CalPERS retiree dies, there are several important steps a spouse/domestic partner or family member can take to help assure prompt payment of any benefits payable by CalPERS.

The **first** step is to notify CalPERS at **888 CalPERS** (or **888-225-7377**) or by letter at P.O. Box 1652, Sacramento, CA, 95812-1652. We will need the following information:

1. Name and Social Security number of deceased retiree.
2. The date of death.
3. Name, address, and telephone number of person providing notice of death
4. Name, address, and telephone number of surviving spouse/domestic partner, other next of kin, or the person whom will be settling the estate.
5. If applicable, Social Security number of surviving spouse or registered domestic partner.
6. Date of birth of surviving spouse or registered domestic partner.
7. Date of marriage or registration of domestic partnership.
8. Whether surviving spouse/domestic partner is able to manage their own financial affairs.

The **second** step is to accumulate documentation. The System will ask for:

1. A photocopy of the certified death certificate.
2. The name, address and phone number of the person handling the estate if the member's estate requires probate. Letters of administration must be submitted by the executor of the estate before benefits can be paid to the estate.
3. Other documents which are not included in the member file such as marriage certificates or birth certificates.

The **third** step is completing the [Application for Retired Member/Payee Survivor Benefits](#) (my|CalPERS 1191) form that is sent by CalPERS. This form is used to determine whether any event has occurred to invalidate the beneficiary designation or to identify persons who might be beneficiaries by law. It is a formal application to receive payment of death or survivor benefits determined payable by CalPERS. The person completing this form is certifying that he/she is the person identified therein. This form should be completed in full and returned to CalPERS with the other documentation, (death certificate, marriage certificate, newspaper clipping, etc.) as quickly as possible. Enclosed with the [Application for Retired Member/Payee Survivor Benefits](#) (my|CalPERS 1191) form will be a [Tax Withholding Election for Survivor Benefits](#) (my|CalPERS 1190) form so an election may be made for Federal and State Tax withholding.

HEALTH INSURANCE

If the beneficiary or survivor is entitled to a monthly benefit and continued coverage under the Public Employees' Medical and Hospital Care Act, as administered by CalPERS, the coverage will be continued automatically. A [Health Benefits Plan Enrollment](#) form (HBD-12) is completed by CalPERS and a copy will be sent to the beneficiary or survivor.

WARRANTS ISSUED AFTER RETIREE'S DEATH

All checks or retirement warrants issued (dated) after the retiree's death should be promptly returned to the System.* If warrants have been mailed to a bank for direct deposit to the retiree's account, CalPERS will contact the bank directly to request repayment of warrants issued after the retiree's death. Any allowance accrued but unpaid prior to the retiree's death will be paid to the eligible beneficiary.

- * Unless the CalPERS representative specifically tells the surviving spouse/domestic partner the payments do not need to be returned.

COMPLETING THE TAX WITHHOLDING ELECTION FOR DEATH BENEFITS

MONTHLY AND/OR PRORATED PAYMENT INCLUDING ANY ALLOWANCE ADJUSTMENTS

The retirement allowance is treated as payroll wages. Federal income tax will be withheld based on the rate of a married person claiming three exemptions unless the beneficiary or survivor elects no withholding, elects a flat amount withheld, or elects a different marital status or number of exemptions. If no election is submitted and the rate of married with three exemptions is used, no federal tax will be withheld if the gross monthly payment is less than the IRS minimum level.

If the beneficiary or survivor is a resident of the State of California, state income tax will also be withheld based on the rate of a married person claiming three exemptions unless they elect no withholding, elect a flat amount withheld, or elect a different marital status or number of exemptions. For California residents, if no election for state withholding is submitted and the rate of married with three exemptions is used, no taxes will be withheld if the gross monthly payment is less than the Franchise Tax Board minimum level.

OPTION ONE, TEMPORARY ANNUITY PAYMENTS AND RETIRED DEATH BENEFIT

If the benefit is payable to a spouse (or ex-spouse awarded a community property interest), death benefits may be non-taxable, partially taxable, or fully taxable. Any taxable portion of the benefit will be subject to 20 percent federal withholding unless rolled over into an IRA. The non-taxable portion of the distribution is not eligible for rollover. This portion will be paid with no taxes deducted and will be reported to the tax authorities as a non-taxable benefit. Special tax rules apply to eligible rollover distributions. The spouse should consult a tax advisor before making a tax election for these benefits.

If someone other than the retiree's spouse or ex-spouse is a beneficiary of all or a portion of an Option One, Temporary Annuity balance, or Retired Death Benefit, the taxable portion of the benefit will be subject to 20 percent federal withholding unless rolled over into an "inherited" type IRA. The non-taxable portion of the distribution is not eligible for rollover. It will be paid with no taxes deducted and will be reported to the tax authorities as a non-taxable benefit. Special tax rules apply to eligible rollover distributions. The non-spouse beneficiary should consult a tax advisor before making a tax election for these benefits.

If the beneficiary lives in California, CalPERS will automatically withhold 3 percent of the taxable portion of the payment for State taxes. If they do not wish to have State tax withheld from an Option One, Temporary Annuity or retired death benefit payment, they must submit a [Tax Withholding Election for Survivor Benefits Including Benefits Eligible for Rollover](#) form (myCalPERS 1192) with the appropriate box checked.

TAX AND INCOME REPORTING INFORMATION

STATEMENT OF BENEFITS PAID AND WITHHOLDING

In January of the year following payment, CalPERS provides each beneficiary with a statement showing the gross amount(s) of benefits paid during the previous calendar year and the amount of income tax withheld, if any. Most payments made by CalPERS are reported to the IRS and Franchise Tax Board. Questions about the taxability of CalPERS benefits should be directed to the IRS, the California Franchise Tax Board, or a tax advisor.

TAXPAYER IDENTIFICATION NUMBER

Section 6109 of the IRS Code requires recipients of reportable payments to furnish Taxpayer Identification Numbers (TINs). The Social Security Number (or Employer ID number, if a trust or organization) must be furnished to CalPERS, even if the beneficiary is not required to file a tax return.

NOTICE OF POSSIBLE PENALTIES

If the beneficiary elects not to have federal tax and/or California State tax withheld, or not enough federal or California State tax withheld, the beneficiary may be responsible for payment of estimated tax. The beneficiary may also incur penalties under the estimated tax rules if withholding and estimated tax payments are not sufficient. IRS Publication 505, ***Tax Withholding and Estimated Tax***, provides additional information.

CHANGING A TAX WITHHOLDING ELECTION

Once a tax withholding election for a monthly benefit is filed, it will remain in effect until another election is filed revoking the original.

To file another election, the beneficiary would need to complete federal form W-4P and state form DE-4P and submit them to CalPERS. This form can be viewed and printed from the Forms & Publications Center on the CalPERS Website.



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California Public Employees' Retirement System

Important: Please attach a copy of the claim showing the original designation of benefits.

DISCLAIMER OF BENEFITS

I, _____ have been notified by , that I
(Please print)
am entitled to receive benefits in the event of the death of:

Member's First Name	Middle Initial	Last Name
---------------------	----------------	-----------

I forgo the benefit of _____ plus any Cost of Living increases and other adjustments payable for life.

I, _____, WITH FULL UNDERSTANDING OF THE NATURE AND AMOUNT OF THE BENEFIT TO WHICH I AM ENTITLED, HEREBY FOREVER DISCLAIM ALL RIGHTS AND INTEREST I HAVE TO THIS BENEFIT IN ITS ENTIRETY.

I understand, due to my disclaimer of the above-described benefit, that it will be paid as if I were never entitled.

I understand by disclaiming my benefit, I have no right to designate any individual to whom the benefit shall be paid.

I understand that recommends I contact an attorney for legal advice prior to signing this Disclaimer of Benefits, but does not require such consultation.

I understand this Disclaimer of Benefits is irrevocable and will not be set aside for any reason, and I hereby release from any claim I have to this benefit.

I assert I have signed this document in accordance with my own free will and I have not been coerced or forced to sign this document by anyone.

I further assert that I understood the contents and effect of this document before signing it and any questions I had concerning the effect or contents of this document were fully answered by personnel prior to my signing this document.



Benefit Services Division
P.O. Box 942711
Sacramento, CA 94229-2711
(888) 225-7377
TDD - (916) 795-3240; FAX (916) 795-3933

Reply To: Section 415
Refer To: SSA#

January 28, 2005

TO: (Agency name)

From: Benefit Services Division

Subject: (Member name)
(Member SSA#)

This is to advise you that an application for Service Retirement is being processed for the above member.

You will receive letter PERS-BAS-62, Notice of Placement on Retirement Roll, after the member is placed on the retirement roll. This letter will provide the employees' effective retirement date and the number of sick leave days that were included in the employee's retirement calculation.

Please provide your employee with information concerning continuation of health and dental benefits into retirement, if applicable.

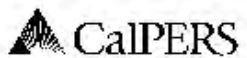
Note: If the employee is eligible to continue his/her dental coverage, a new dental enrollment form must be submitted to:

CalPERS, Benefits Services Division
Attn: Warrant/Roll Support Unit #468
PO Box 942716
Sacramento, CA 94229-2716

For information regarding health and dental eligibility or enrollment processing procedures for annuitants, please refer to your Health Benefits Procedure Manual or contact Health Benefit Services Division toll free at (888) CalPERS (225-7377).

BSD-197-W

California Public Employees' Retirement System
Lincoln Plaza- 400 P Street- Sacramento, CA 95814



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California Public Employees' Retirement System

Business Partner CalPERS ID:

1. Please describe special compensation listed below in detail.
2. Fax supporting MOU pages for special compensation items.
3. Identify periods covered for any lump sum payments
4. Please fax formal salary schedule for pay rate(s).

Service Period	Pay Rate Reported	Special Compensation Reported	Type
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- Please fax information within 48 hours time to the fax number above.



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www.calpers.ca.gov

California Public Employees' Retirement System

Application for Retired Member/Payee Survivor Benefits

Name of the Deceased Member _____ Social Security Number / CalPERS ID Number _____

Signature Section

Required Information

This section is required. By filling out this section, you certify under penalty of perjury under the laws of the State of California that the information provided here is correct to the best of your knowledge. You also certify that you are the person named in the Social Security card and provide your Social Security number.

Name (First Name, Middle Initial, Last Name) _____ () _____
Daytime Phone _____

Signature _____ Date (mm/dd/yyyy) _____

Social Security Number _____ Relationship to Deceased _____ Male / Female
Gender _____

Provide an address for other correspondence only if it is different than the address you provided for payment.

Address for Payment _____

City _____ State _____ ZIP _____

Address for Other Correspondence _____

City _____ State _____ ZIP _____

Was the deceased a member of another public retirement system in California?
(e.g., STRS, UCRS, County or City Retirement System) ☐ Yes ☐ No ☐ Don't Know

If Yes, Name of System _____

Section 1

Information About the Member and Immediate Family

Please fill out this form as completely as possible. The information will help us determine who is entitled to survivor benefits.

Will the estate of the deceased require probate? ☐ Yes ☐ No ☐ Don't Know

Did the deceased leave a will? ☐ Yes ☐ No ☐ Don't Know

(Copy is not required unless the estate is the named beneficiary and does not require probate.)

Name of Executor/Administrator _____

Address _____

City _____ State _____ ZIP _____ () _____
Daytime Phone _____

Attorney Handling Probate _____

Address _____

City _____ State _____ ZIP _____ () _____
Daytime Phone _____



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California Public Employees' Retirement System

Tax Withholding Election for Survivor Benefits

Name of the Deceased _____

Social Security Number / CalPERS ID Number _____

Section 1

There are penalties for not paying enough taxes during the year. Estimated tax requirements and penalties are explained in Internal Revenue Service Publication 505. To order this publication, call (800) 829-3676.

Prorated Payment Including Any Allowance Adjustments

Federal Tax Withholding Election

☐ I do not elect to have federal tax withheld from my death benefit payment(s).

☐ I elect to have federal tax withheld based on: ☐ Single _____ ☐ Married _____
Number of Exemptions Number of Exemptions

In addition, I elect to have the following amount of federal tax withheld: \$ _____.

☐ I elect to have the following flat amount of federal tax withheld: \$ _____.

California State Tax Withholding Election

☐ I do not elect to have state tax withheld from my death benefit payment(s).

☐ I elect to have state tax withheld based on: ☐ Single _____ ☐ Married _____
Number of Exemptions Number of Exemptions

In addition, I elect to have the following amount of state tax withheld: \$ _____.

☐ I elect to have the following flat amount of state tax withheld: \$ _____.

☐ I elect to have state tax withheld in the amount of 10 percent of the amount withheld for federal income tax withholding.

Section 2

Be sure to sign this form if you make an election. Otherwise, we will return the form for your signature, which will delay payment if you are the beneficiary.

Tax Election Declaration

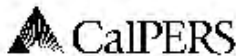
By signing here, I hereby make the elections checked above.

Your Signature _____

Social Security Number or Tax Identification Number _____

Date (mm/dd/yyyy) _____

Important: Failure to return this form will be considered an election to have taxes withheld.



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California Public Employees' Retirement System

Tax Withholding Election for Survivor Benefits Including Benefits Eligible for Rollover

Name of the Deceased Member _____ Social Security Number \ CalPERS ID Number _____
You may be eligible for a lump sum and/or monthly benefit. Please complete all applicable sections of this form.

Important: Failure to return this form will be considered an election to have taxes withheld.

Section 1 Monthly (Periodic Payments) and/or Prorated Payment

There are penalties for not paying enough taxes during the year. Estimated tax requirements and penalties are explained in Internal Revenue Service Publication 505. To order call (800) 829-3676.

Federal Tax Withholding Election

☐ I do not elect to have federal tax withheld from my death benefit payment(s).
☐ I elect to have federal tax withheld based on: ☐ Single ☐ Married
Number of Exemptions _____ Number of Exemptions _____
In addition, I elect to have the following amount of federal tax withheld \$ _____.
☐ I elect to have the following flat amount of federal tax withheld \$ _____.

California State Tax Withholding Election

☐ I do not elect to have State tax withheld from my death benefit payment(s).
☐ I elect to have State tax withheld based on: ☐ Single ☐ Married
Number of Exemptions _____ Number of Exemptions _____
In addition, I elect to have the following amount of federal tax withheld \$ _____.
☐ I elect to have the following flat amount of State tax withheld \$ _____.
☐ I elect to have State tax withheld in the amount of 10 percent of the amount withheld for federal income tax withholding.

Section 2 Lump Sum(Non-Periodic Payments) Option One and Temporary Annuity Payments

Important

Please consider your election carefully. Once payment has been issued, you cannot make a change. Your decision is final once payment has been made.

IRA Information
A spouse or ex-spouse awarded a community property interest has the right to rollover the taxable portion into a "Qualified IRA" or "Inherited IRA".

However, Federal law provides that a non-spouse or same sex spouse beneficiary is subject to 20% withholding unless rolled into an IRA established on their behalf that will be treated as an "Inherited IRA" pursuant to provision of IRC §402(c)(11).

Federal Tax Withholding Election

☐ I do not elect to have the taxable portion of the lump sum benefit payment rolled into an Individual Retirement Account (IRA). I understand that 20 percent federal tax will be withheld.
☐ I elect to have the taxable portion of the lump sum benefit payment rolled into the following Individual Retirement Account (IRA).

Name of Financial Institution _____

Plan Name _____

Account Number _____

Address of Institution _____

City _____

State _____

ZIP Code _____

California Tax Withholding Election

☐ I do not elect to have State tax withheld from my lump sum benefit payment.
☐ I elect to have State tax withheld from my lump sum benefit payment.



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California Public Employees' Retirement System

Date

Name

Address

City/State/Zip

CalPERS ID:

Dear

Your Service Retirement Allowance:

Your election to receive the Option 2 has been processed.

Your retroactive warrant will be issued on June 04, 2012, and will cover the period of December 02, 2011 through May 31, 2012.

Your monthly retirement benefit is \$2,241.64 based on your retirement date of December 02, 2011. This amount does not include any deduction you have authorized this system to make. Your first regular warrant will arrive on or shortly after July 01, 2012 and will cover the period of 06/01/2012 through 06/30/2012. Your future retirement warrant will be mailed to arrive shortly after the first of the month following the month to which they apply.

BENEFICIARY/SURVIVOR ALLOWANCE:

Upon your death, benefits will be paid to your beneficiary in accordance with the designation indicated on your retirement election document. If you elected a benefit which requires marriage and/or birth documentation and you have not submitted these documents, please send them immediately to Benefit Services Division. If the documents are not in file at the time of your death, it may be necessary to delay payment of benefits to your beneficiary.

INCOME TAX INFORMATION:

The following information regarding your contributions will assist you in the determination of the taxability of your benefit.

CONTRIBUTIONS	TOTAL CONTRIBUTIONS AND INTEREST	INTEREST	TAXED CONTRIBUTIONS	NON-TAXED CONTRIBUTIONS
Normal				
TOTAL				

myCalPERS 0924



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www.calpers.ca.gov

California Public Employees' Retirement System

Date

Employer Name
Address
City/State/Zip

CalPERS ID:

Subject:

Participant CalPERS ID:

Notice of Placement on Retirement Roll:

This is to advise you that the employee named above has been placed on our 05/2012 Service Retirement roll with an effective date of May 01, 2012 and a separation date of April 30, 2012. 0.0 days of unused sick leave have been credited to the member's account. 0.0 days of unused education leave have been credited to the member's account. The employee's separation date is the date following the employee's last day in employment status. The date can be equal to but no later than the retirement date. Please notify us immediately if separation did not occur by the date.

For information regarding employment of a retired member, please see your "Procedure Manual for Reporting to the California Public Employees' Retirement System." If any of the information above is not correct, please contact us.

If you have any questions, please visit our Web site www.calpers.ca.gov, or you may contact us toll free at 888 CalPERS (or 888-225-7377).

Benefit Services Division

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Page 1 of 1



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www.calpers.ca.gov

California Public Employees' Retirement System

Date

Name
Address
City/State/Zip

CalPERS ID:

Dear

This letter is to acknowledge receipt of your application for
Service Retirement effective July 01, 2012.

If you are currently enrolled in a CalPERS basic health plan you may continue your health insurance into retirement. Please contact your personnel office to ensure your health benefit coverage is active until your retirement processing is completed.

You may be entitled to receive a disability retirement if you are unable to work because of an illness or injury. To request a service pending disability retirement, you must complete a Disability Retirement Election Application. Please note that your retirement date cannot be earlier than the day following your last day on pay status.

CalPERS will send you a letter providing the date of your first retirement check, the amount you can expect to receive, and important income tax information. This letter is usually sent after you have separated from employment but before you receive your first retirement benefit check. Changes to the benefit option election you make, beneficiary you designate, or the retirement date you request, cannot be made after you receive your first full retirement benefit check.

Retirement Type:
Last Day on Payroll:
Date of Birth:

Retirement Effective Date:
Option Selected:

Federal Tax:
State Tax:

myCalPERS 0964